PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/568,446				ling Date 15/2006	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)										ENTITY	OR		HER THAN
FOR			NUMBER FILED		NUMBER EXTRA		П	RATE (\$	_	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	_	N/A		N/A		ı	N/A	7	122 (0)	ı	N/A	TEE (0)
\vdash	SEARCH FEE	or (c))	N/A		N/A		ı	21/4	-				-
౼	(37 CFR 1.16(k), (i), (ii)		N/A		N/A		ı	N/A	-		ı	N/A	
TO	(37 CFR 1.16(a), (p), TAL CLAIMS		7 minus 20 =		• 0		l	N/A			0.0	N/A	
	CFR 1.16(i)) EPENDENT CLAIM				, ,			~ *	_		OR	X \$50 =	0
	CFR 1.16(h))			inus 3 =	• 0			X \$	=			X \$200 =	0
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and drawings es sheets of paper, the application siz is \$250 (\$125 for small entity) for e additional 50 sheets or fraction the 35 U.S.C. 41(a)(1)(G) and 37 CFR										
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))												
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.											TOTAL	0
	APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									SMALL ENTITY			ER THAN ALL ENTITY
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$	6)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.160))		Minus	**			l	x \$	=		OR	x \$ =	
	Independent (37 CFR 1.16(h))	•	Minus	***			1	x \$	=		OR	x s =	
Ĭ	Application Size Fee (37 CFR 1.16(s))												
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))										OR		
								TOTAL ADD'L FEE			OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)													
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE (\$	5)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16())		Minus	**			l	× \$	=		OR	x s =	
	Independent (37 CFR 1,16(h))		Minus	***			1	X \$	=		OR	x s =	
富	Application Size Fee (37 CFR 1.16(s))										1		
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))										OR		
											OR	TOTAL ADD'L FEE	
** 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 10, enter "20". * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20. * If												

This collection of information is equated by 37 CER. 1.16. The information is required to obtain or retain a besteff by the public which his lost figured by the USETO to monoceasil an implication. Confidentiality is ownered by 80 Sec. 22 and 37 CER 1.16. This collection is estimated in table 22 institutes to complete a modeling pathways, preparing, and submitting the completed application form to the USETO. Time well vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or seggestions for reducing this burdon, should be sent to the CERT information Officer. U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandrias, VA 2213-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandrias, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS